

Application submitted by: (Name and Address) Name: _____ Street Address: _____ City, State, Zip Code: _____ Telephone No. _____	FOR COURT USE ONLY
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF MENDOCINO</b> Street Address: 100 North State Street City, State and Zip Code: Ukiah, CA 95482 Branch Name: SITTING AS THE JUVENILE COURT	
Child's Name: _____	
<b>COMPLAINT ABOUT PERFORMANCE OF COURT APPOINTED ATTORNEY</b>	CASE NUMBER: _____

<b>Name of applicant:</b> _____	
<b>Relationship to the minor(s):</b> _____	
<b>Attorney's Name:</b> _____	

The specific reasons for my complaint are: (must be typewritten or printed legibly)
I am requesting the following:

Attach separate page if needed.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature

Any complaint must be submitted on this form or at least have this form as a cover page to the application. The application must be filed at the Superior Court, 100 North State Street, Room 107, Ukiah, California.